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PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 042390.P8456

Total Pages 3

First Named Inventor or Application Identifier Randy B. Osborne

Express Mail Label No. EL143564497US

jc836 U.S. PTO
09/29/00

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
2. Specification (Total Pages 16)
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claims
 - Abstract of the Disclosure
3. Drawings(s) (35 USC 113) (Total Sheets 2)
4. Oath or Declaration (Total Pages)
 - a. Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed) (**Note Box 5 below**)
 - i. DELETIONS OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
5. Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
6. Microfiche Computer Program (Appendix)

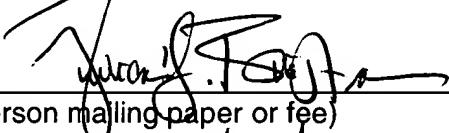
7.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
a.	<input type="checkbox"/> Computer Readable Copy		
b.	<input type="checkbox"/> Paper Copy (identical to computer copy)		
c.	<input type="checkbox"/> Statement verifying identity of above copies		
ACCOMPANYING APPLICATION PARTS			
8.	<input type="checkbox"/> Assignment Papers (cover sheet & documents(s))		
9.	<input type="checkbox"/> a. 37 CFR 3.73(b) Statement (where there is an assignee) <input type="checkbox"/> b. Power of Attorney		
10.	<input type="checkbox"/> English Translation Document (if applicable)		
11.	<input type="checkbox"/> a. Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> b. Copies of IDS Citations		
12.	<input type="checkbox"/> Preliminary Amendment		
13.	<input checked="" type="checkbox"/> X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
14.	<input type="checkbox"/> a. Small Entity Statement(s) <input type="checkbox"/> b. Statement filed in prior application, Status still proper and desired		
15.	<input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)		
16.	<input checked="" type="checkbox"/> X Other: <u>Unexecuted Declaration and Power of Attorney For Patent Application (4 pgs)</u> <hr/> <hr/>		
17.	If a CONTINUING APPLICATION , check appropriate box and supply the requisite information:		
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____			
18.	Correspondence Address		
<input type="checkbox"/> Customer Number or Bar Code Label _____ (Insert Customer No. or Attach Bar Code Label here) or			
<input checked="" type="checkbox"/> X Correspondence Address Below			
NAME	<u>Bradley J. Bereznak</u>		
<u>BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP</u>			
ADDRESS	<u>12400 Wilshire Boulevard</u>		
<u>Seventh Floor</u>			
CITY	<u>Los Angeles</u>	STATE	<u>California</u>
ZIP CODE	<u>90025-1026</u>		
Country	<u>U.S.A.</u>	TELEPHONE	<u>(408) 720-8598</u>
		FAX	<u>(408) 720-939</u>

"Express Mail" mailing label number: EL143564497US
Date of Deposit: September 29, 2000

I hereby certify that I am causing the foregoing transmittal, copy thereof, attached fee transmittal, copy thereof, check in the amount of \$744.00, attached specification and drawings, and an unexecuted Declaration and Power of Attorney, to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that these papers and fee have been addressed to the Assistant Commissioner for Patents, Box Patent Application, Washington, D. C. 20231

Vivian Y. Buijten

(Typed or printed name of person mailing paper or fee)



(Signature of person mailing paper or fee)

9/29/00

(Date signed)

FEE TRANSMITTAL FOR FY 2000**TOTAL AMOUNT OF PAYMENT (\$)** **\$ 744.00****Complete if Known:**Application No. Not Yet AssignedFiling Date September 29, 2000 (Concurrently Herewith)First Named Inventor Osborne, R.Group Art Unit Not Yet AssignedExaminer Name Not Yet AssignedAttorney Docket No. 042390.P8456**METHOD OF PAYMENT** (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666
Deposit Account Name _____

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. Payment Enclosed:

Check
 Money Order
 Other

FEE CALCULATION**1. BASIC FILING FEE**

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee	Fee	Fee	Fee
Code	(\$)	Code	(\$)
101	690	201	345
106	310	206	155
107	480	207	240
108	690	208	345
114	150	214	75
		Utility application filing fee	
		Design application filing fee	
		Plant filing fee	
		Reissue filing fee	
		Provisional application filing fee	
SUBTOTAL (1) \$ 690.00			

2. EXTRA CLAIM FEES

	<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims 23	- 20** = 3	X 18.00	= 54.00
Independent Claims 3	- 3** = 0	X 78.00	= 00.00
Multiple Dependent		260.00	=

**Or number previously paid, if greater; For Reissues, see below.

Large Entity Small Entity

<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee Description</u>
Code	(\$)	Code	(\$)	
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	**Reissu independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 54.00

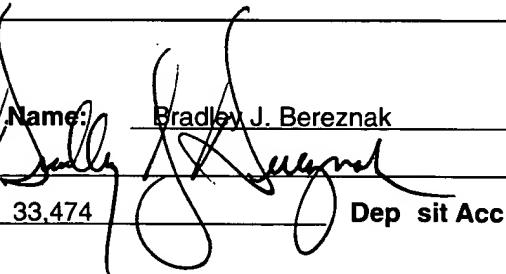
FEE CALCULATION (continued)**3. ADDITIONAL FEES**

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee Code	Fee (\$)	Fee Code (\$)	
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	380	216	190
117	870	217	435
118	1,360	218	680
128	1,850	228	925
119	300	219	150
120	300	220	150
121	260	221	130
138	1,510	138	1,510
140	110	240	55
141	1,210	241	605
142	1,210	242	605
143	430	243	215
144	580	244	290
122	130	122	130
123	50	123	50
126	240	126	240
581	40	581	40
146	690	246	345
149	690	249	345
Other fee (specify)			
Other fee (specify)			

SUBTOTAL (3) \$ 00.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Bradley J. Bereznak
 Signature 
 Date Sept. 29, 2000
 Reg. Number 33,474 Dep sit Accunt User ID _____
 (complete if applicable)